PTO/SB/05 t08-03;
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		ENT APPLIC	ATION						
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY	OR	OTHER THAN SMALL ENTITY		
FOR NUMBÉR			RFILED	NUMBEREXTRA		RAJE FE	E	RATE	FEE
	C FEE FR 1 15(a))				T		OF		\s
TOTAL CLAIMS . 3" CER 1 (6,5) minut			ninus 20			x s=	Ø P	x 3=	
INDEPENDENT CLAIMS (37 CFR 1 (60)) minus 3				x s =	g/R	x s=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR : 16(d))						+ s=	OR	+ s'=	
If the difference in column 1 is less than zero, enter 10 in column 2						TOTAL.	OR	TOTAL	
// CLAIMS AS AMENDED - PART II									
7	1/04	(Column 1)	•	(Column 2)	(Column 3)	SMALL ENTIT	Y OF		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		DI- NAL EE	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	22	Minus		⁻ 2	x s=	OR	x s <u>18</u> =	36
	Independent (37 CFR 1 16(b))	. 5	Minus	3	= 21	x s=	OR	x s_8(=	72
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1-15(d))					+ \$=	OR	+ \$=	
					TOTAL ADD'L FEE	OR	TOTAL ADD'L FEE	208	
	(Column 1) (Column 2) (Column 3)								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	TIO	DDI- NAL EE	RATE	ADDI- TIONAL FEE
	Total (37 CFE : 16(cm	•	Minus		=	x s=	OR	x s=	
	Independent (37 CFR 1 16(5))		Minus		=	x \$=	OR	х 3=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1 18(d))					+ 5 . =	OR	+ \$=	
						TOTAL ADD'L FEE	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)				, -
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	TIC	DDI- DNAL EE	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1 16(c))	•	Minus	••	=	x s=	OR	x s=	
	Independent (37 CFR 1 16(b))	<u> </u>	Minus		=	x s =	OR	x s =	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					+ 5 =	OR	+ \$=	·
						TOTAL ADD'L FEE	OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.									

This collection of information is required by 37 CFR 1 16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U S C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U S Patent and Trademark Office U S Department of Commerce PO Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) OR SMALL ENTITY TYPE -**FOR NUMBER EXTRA** NUMBER FILED RATE RATE FEE 380.00-760.00 **BASIC FEE** OR minus 20= **TOTAL CLAIMS** X\$18= X\$ 9= OR minus 3 = INDEPENDENT CLAIMS X39 =X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +260= +130= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA FEE FEE PAID FOR** AMENDMENT Total Minus X\$ 9= X\$18=OR Independent Minus X78= X39 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130=4OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-NUMBER REMAINING PRESENT TIONAL RATE TIONAL RATE AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE/ **AMENDMENT** PAID FOR Total Minus X\$ 9= X\$18= OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL ADDIT. FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER : PRESENT TIONAL TIONAL RATE **AFTER PREVIOUSLY EXTRA** RATE **AMENDMENT AMENDMENT** PAID FOR FEE FEE Total Minus X\$18≠ X\$ 9= OR Independent Minus : X78= X39= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= ÓR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number